

AN ACT

RELATING TO INSURANCE; PROVIDING FOR PARITY FOR MENTAL HEALTH
INSURANCE; AMENDING AND ENACTING SECTIONS OF THE NMSA 1978.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

Section 1. A new Section 59A-22-2.1 NMSA 1978 is
enacted to read:

"59A-22-2.1. PARITY FOR MENTAL HEALTH INSURANCE.--

A. An insurer, including a health maintenance organization, nonprofit health care plan or fraternal benefit society that offers a group health plan or an individual health plan shall not impose treatment limitations or financial requirements on the coverage of mental health services if similar limitations or requirements are not imposed on coverage of services for other conditions.

B. An insurer, including a health maintenance organization, nonprofit health care plan or fraternal benefit society that offers a group health care plan or an individual health care plan may:

(1) require pre-admission screening prior to the authorization of mental health services if covered under a plan;

(2) apply other limitations that restrict coverage for mental health services to those that are medically necessary; and

(3) exclude mental health services from the plan.

C. This section does not apply to disability income insurance or long-term care insurance.

D. For purposes of this section, "mental health services" means mental health services as defined under the terms of the plan or coverage but does not include services with respect to treatment of substance abuse, chemical dependency or gambling addiction."

Section 2. Section 59A-23-4 NMSA 1978 (being Laws 1984, Chapter 127, Section 463, as amended by Laws 1997, Chapter 7, Section 2 and by Laws 1997, Chapter 249, Section 2 and by Laws 1997, Chapter 250, Section 2 and also by Laws 1997, Chapter 255, Section 2) is amended to read:

"59A-23-4. OTHER PROVISIONS APPLICABLE.--

A. No blanket or group health insurance policy or contract shall contain any provision relative to notice or proof of loss or the time for paying benefits or the time within which suit may be brought upon the policy that in the superintendent's opinion is less favorable to the insured than would be permitted in the required or optional provisions for individual health insurance policies as set forth in Chapter 59A, Article 22 NMSA 1978.

B. The following provisions of Chapter 59A, Article 22 NMSA 1978 shall also apply as to Chapter 59A,

Article 23 NMSA 1978 and blanket and group health insurance contracts:

(1) Section 59A-22-1 NMSA 1978, except Subsection C of that section;

(2) Section 59A-22-2.1 NMSA 1978; and

(3) Section 59A-22-32 NMSA 1978.

C. The following provisions of Chapter 59A, Article 22 NMSA 1978 shall also apply as to group health insurance contracts:

(1) Section 59A-22-33 NMSA 1978;

(2) Section 59A-22-34 NMSA 1978;

(3) Section 59A-22-34.1 NMSA 1978;

(4) Section 59A-22-35 NMSA 1978;

(5) Section 59A-22-36 NMSA 1978;

(6) Section 59A-22-39 NMSA 1978;

(7) Section 59A-22-34.3 NMSA 1978;

(8) Section 59A-22-39.1 NMSA 1978;

(9) Section 59A-22-40 NMSA 1978; and

(10) Section 59A-22-41 NMSA 1978."

Section 3. Section 59A-46-30 NMSA 1978 (being Laws 1993, Chapter 266, Section 29, as amended) is amended to read:

"59A-46-30. STATUTORY CONSTRUCTION AND RELATIONSHIP TO OTHER LAWS.--

A. The provisions of the Insurance Code other

than Chapter 59A, Article 46 NMSA 1978 shall not apply to health maintenance organizations except as expressly provided in the Insurance Code and that article. To the extent reasonable and not inconsistent with the provisions of that article, the following articles and provisions of the Insurance Code shall also apply to health maintenance organizations and their promoters, sponsors, directors, officers, employees, agents, solicitors and other representatives. For the purposes of such applicability, a health maintenance organization may therein be referred to as an "insurer":

- (1) Chapter 59A, Article 1 NMSA 1978;
- (2) Chapter 59A, Article 2 NMSA 1978;
- (3) Chapter 59A, Article 4 NMSA 1978;
- (4) Subsection C of Section 59A-5-22 NMSA 1978;
- (5) Sections 59A-6-2 through 59A-6-4 and 59A-6-6 NMSA 1978;
- (6) Chapter 59A, Article 8 NMSA 1978;
- (7) Chapter 59A, Article 10 NMSA 1978;
- (8) Section 59A-12-22 NMSA 1978;
- (9) Chapter 59A, Article 16 NMSA 1978;
- (10) Chapter 59A, Article 18 NMSA 1978;
- (11) Chapter 59A, Article 19 NMSA 1978;
- (12) Section 59A-22-2.1 NMSA 1978;

- (13) Section 59A-22-14 NMSA 1978;
- (14) Chapter 59A, Article 23B NMSA 1978;
- (15) Sections 59A-34-9 through 59A-34-13, 59A-34-17, 59A-34-23, 59A-34-36 and 59A-34-37 NMSA 1978;
- (16) Chapter 59A, Article 37 NMSA 1978; and
- (17) the Patient Protection Act.

B. Solicitation of enrollees by a health maintenance organization granted a certificate of authority, or its representatives, shall not be construed as violating any provision of law relating to solicitation or advertising by health professionals, but health professionals shall be individually subject to the laws, rules, regulations and ethical provisions governing their individual professions.

C. Any health maintenance organization authorized under the provisions of the Health Maintenance Organization Law shall not be deemed to be practicing medicine and shall be exempt from the provisions of laws relating to the practice of medicine."

Section 4. Section 59A-47-33 NMSA 1978 (being Laws 1984, Chapter 127, Section 879.32, as amended) is amended to read:

"59A-47-33. OTHER PROVISIONS APPLICABLE.--The provisions of the Insurance Code other than Chapter 59A, Article 47 NMSA 1978 shall not apply to health care plans except as expressly provided in the Insurance Code and that

article. To the extent reasonable and not inconsistent with the provisions of that article, the following articles and provisions of the Insurance Code shall also apply to health care plans, their promoters, sponsors, directors, officers, employees, agents, solicitors and other representatives; and, for the purposes of such applicability, a health care plan may therein be referred to as an "insurer":

- A. Chapter 59A, Article 1 NMSA 1978;
- B. Chapter 59A, Article 2 NMSA 1978;
- C. Chapter 59A, Article 4 NMSA 1978;
- D. Subsection C of Section 59A-5-22 NMSA 1978;
- E. Sections 59A-6-2 through 59A-6-4 and
59A-6-6 NMSA 1978;
- F. Section 59A-7-11 NMSA 1978;
- G. Chapter 59A, Article 8 NMSA 1978;
- H. Chapter 59A, Article 10 NMSA 1978;
- I. Section 59A-12-22 NMSA 1978;
- J. Chapter 59A, Article 16 NMSA 1978;
- K. Chapter 59A, Article 18 NMSA 1978;
- L. Chapter 59A, Article 19 NMSA 1978;
- M. Section 59A-22-2.1 NMSA 1978;
- N. Subsections B through E of Section
59A-22-5 NMSA 1978;
- O. Section 59A-22-14 NMSA 1978;
- P. Section 59A-22-34.1 NMSA 1978;

Q. Section 59A-22-39 NMSA 1978;
R. Section 59A-22-40 NMSA 1978;
S. Section 59A-22-41 NMSA 1978;
T. Sections 59A-34-9 through 59A-34-13 and
59A-34-23 NMSA 1978;

U. Chapter 59A, Article 37 NMSA 1978, except
Section 59A-37-7 NMSA 1978;

V. Section 59A-46-15 NMSA 1978; and

W. the Patient Protection Act."

Section 5. APPLICABILITY.--The provisions of this act
shall apply to health insurance policies entered into or
renewed on or after January 1, 2000. _____